

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>M. J. D.</i>	<i>50</i>	<i>8-13</i>
O.I.P.E. CLASSIFIER	<i>SI</i>	<i>1021</i>	<i>09-15-9</i>
FORMALITY REVIEW			<i>09/13/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	<i>11/9/03</i>
2	<i>✓</i>
3	<i>✓</i>
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14	<i>✓</i>
15	<i>✓</i>
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Claim	Date
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If more than 150 claims or 10 actions  
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